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self, and truly, as the very "last straw," it is in your power to refuse the special duty and remain at home, as no human being is so valuable that his or her place cannot be filled, and there are plenty of nurses who gladly do hospital work.

Massachusetts.

BOSTON CITY GRADUATE.

TIME OFF DUTY

DEAR EDITOR: I have been interested in letters in the JOURNAL on both home and hospital nursing by the private duty nurse. I have been doing private duty work for seventeen years, and have never found it hard to get time off. If the patient or family do not expect me to take time, it is because, as a rule, they do not understand the necessity of it, both for the patient and the nurse. I explain that better work can be done and that the patient improves more rapidly because of the nurse coming back rested and bringing with her a little of the outside world. After such explanations, I have never found either the patient or family disagreeable about it. The amount of time taken would be regulated by sleep lost and home conditions. One thing insisted on is two hours out of every twenty-four.

I have never nursed in a hospital where the superintendent was not willing to give "specials" relief. We, the "specials," realize that we were given no thought when hospitals were built, but this condition would not exist if the superintendents were consulted.

A few words to the new graduate about isolated country cases: I ask for a pail for "slops" and place it out of doors, near by, then I ask for plenty of water, so that at night, or even by day, I am not obliged to run quarter of a mile for water, or to the out-door closet. I have always found some member of the family willing to care for the same, and keep up the water supply, for they look on that as their share in helping their loved ones regain health, and in so doing they help the nurse to retain hers and to do better work. Always go halfway, and maybe a step over, and the next time you will find them meeting you more than halfway and singing your praises to their neighbors.

M.

Michigan.

CONDUCT OF NURSES

DEAR EDITOR: I have been a silent reader of the JOURNAL for a number of years and have enjoyed the various discussions very much, especially those on the conduct of nurses. I think this very important subject should be impressed more forcibly on pupil nurses, especially in small schools. A nurse cannot be too careful, especially in public, where the eyes of all are upon her. The trained nurse is never unnoticed. Let us, as women stand for what we mean, dignity, refinement, purity and gentleness, not for something to be gossiped about. Nursing is a noble work, but so abused by some who do not heed or come up to the standard. I appreciate the fact that there are many who love it and are working for higher education and a higher standard among those who would enter the profession. May we rapidly push the work along until all are debarred who cannot come up to it.

I do not think a nurse can do her patient a greater harm than to discuss her or her troubles with any one. She should never mention anything that passes while the patient is in her charge. There are always busybodies ready to quiz, and to ask what he or she has done or suffered. I make it a practice to inform such that of course the patient was sick, but that I do not care to discuss their troubles. It means much to a nurse to be able to keep her counsel.

M. T.

Georgia.